

**APPLICATION DATA SHEET**

**Application Information**

Application Type: National Phase  
Subject Matter: Utility  
Suggested Classification:  
Suggested Group Art Unit:  
CD-ROM or CD-R?: None  
Number of CD disks:  
Number of copies of CDs:  
Sequence submission?:  
Computer Readable Form (CRF):  
Number of copies of CRF:  
For: NOVEL MEDICINE PACK  
Attorney Docket Number: 27270U  
Request for Early Publication?: No  
Request for Non-Publication?: No  
Suggest Drawing Figure:  
Total Drawing Sheets: 35  
Small Entity?: No  
Latin name:  
Variety denomination name:  
Petition included?: No  
Petition Type:  
Licensed U.S. Govt. Agency:  
Contract or Grant Numbers:  
Secrecy Order in Parent Appl.?:

**Applicant Information (1)**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Andreas  
Middle Name:  
Family Name: KLATT

Name Suffix:  
City of Residence: Stockach  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Hofaeckerstr. 8,  
City of mailing address: Stockach  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78333

**Applicant Information (2)**

Applicant Authority type: Inventor  
Primary Citizenship Country: DE  
Status: Full Capacity  
Given Name: Klaus  
Middle Name:  
Family Name: HINDEREGGER  
Name Suffix:  
City of Residence: Orsingen-Nenzingen  
State or Province of Residence:  
Country of Residence: DE  
Street of Mailing address: Kirnbergstr. 2,  
City of mailing address: Orsingen-Nenzingen  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78359

**Representative Information**

Representative Customer Number:	034375
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**Domestic Priority Information**

Application:	Continuity Type:	Parent Application:	Parent Filing Date:

**Foreign Priority Information**

Country:	Application number:	Filing Date:	Priority Claimed:
DE	103 49 565.7	October 22, 2003	Yes

**Assignee Information**

Assignee name: Altana Pharma AG  
Street of mailing address: Byk-Gulden-Str. 2  
City of mailing address: Konstanz  
State/Province of mailing address:  
Country of mailing address: DE  
Postal Code of mailing address: 78467